Kaiser Health News

From: Kaiser Health News

Sent: Wednesday, June 21, 2017 9:15 AM

To: Cox-Kain, Julie

Subject: KHN Morning Briefing: June 21, 2017

Not rendering correctly? View this email as a web page <u>here</u>.

Not a subscriber? Sign up

Morning Briefing

Wednesday, June 21, 2017

Check Kaiser Health News online for the latest headlines

In This Edition:

KAISER HEALTH NEWS ORIGINAL STORIES

- 1. A Clinic Mix-Up Leaves Pregnant Woman In Dark About Zika Risk
- 2. The New War On Sepsis
- 3. Political Cartoon: 'In Good Hands?'

HEALTH LAW

- 4. GOP To Unveil Bill Thursday, McConnell Promises Senators Will Have 'Adequate Time' To Review It
- 5. McConnell's Political Gamble: Wily Strategist Likely To Hold Vote Despite Uncertainty Over Passage
- 6. Money To Fight Opioid Epidemic Could Be Deciding Factor For Health Bill's Chances
- 7. By Opting For Secrecy, GOP Dodged Headaches Transparency Would Have Brought

MARKETPLACE

- 8. Despite Threats To Cut Them Off, Trump Administration Makes Insurer Payments For June
- 9. Today Is Deadline For Insurers To Commit To Sell In 2018's 'Very Challenged' Obamacare Market

CAPITOL HILL WATCH

10. Where Georgia's Newest Congresswoman Stands On Health Care Issues

MEDICAID

11. Wisconsin Medicaid Supporters Decry Proposal For Drug Testing As Cruel And Demeaning

VETERANS' HEALTH CARE

12. Failures Of VA Pharmacy System Put Patient Safety At Risk, GAO Report Finds

PUBLIC HEALTH AND EDUCATION

- 13. They're Going To Addiction Treatment Centers For Help And 'Leaving In Body Bags'
- 14. As Extra Pounds On Kids Becomes New Normal, Task Force Issues Obesity Screening Guidelines
- 15. Though Fervor Over Zika Has Faded, Experts Warn Vigilance Is Still Needed

WOMEN'S HEALTH

16. Abortion-Rights Groups File Suit Over Ark. Laws For Creating 'Burdensome Bureaucratic Hurdles'

STATE WATCH

- 17. Mass. Gov. Presents Plan To Push Businesses To Pay More Of State's Rising Medicaid Expenses
- 18. State Highlights: Pa. Hospital 'Super Users' Run Up \$1.25B Tab; Mass. Dentists Charge Delta Dental Violated Nonprofit Rules

PRESCRIPTION DRUG WATCH

- 19. High Drug Cost Controversy Reflected In Drop Of Expected Sales For First Time In A Decade
- 20. Perspectives: The Flaws And Fluff Of Trump's Drug Pricing Plan

EDITORIALS AND OPINIONS

- 21. Different Takes: Demanding Explanations About The Contents Of The GOP's 'Secret' Health Plan And The Process Used To Craft It
- 22. State Thoughts On Pending Health Plans: Protect Medicaid Expansion; What About Nevada's Obamacare Solution?
- 23. Viewpoints: A New Tool In The Fight Against The Opioid Epidemic; Standing Up For The Hungry

From Kaiser Health News:

KAISER HEALTH NEWS ORIGINAL STORIES

1. A Clinic Mix-Up Leaves Pregnant Woman In Dark About Zika Risk

A Washington state woman didn't find out for months that she was likely infected with the virus that can cause serious birth defects. Clinic officials say they'll do better. (JoNel Aleccia, 6/21)

2. The New War On Sepsis

Armed with strict guidelines and motivated by sheer urgency, a specialized team of nurses makes the rounds, seeking to thwart the No. 1 killer in U.S. hospitals. (Anna Gorman, 6/21)

3. Political Cartoon: 'In Good Hands?'

Kaiser Health News provides a fresh take on health policy developments with "Political Cartoon: 'In Good Hands?'" by John Cole, The Scranton Times-Tribune.

Here's today's health policy haiku:

THE COSTS OF CONCIERGE MEDICINE

Child emergency!
Concierge to the rescue!
Another child waits.

- Anonymous

If you have a health policy haiku to share, please Contact Us and let us know if you want us to include your name. Keep in mind that we give extra points if you link back to a KHN original story.

Summaries Of The News:

HEALTH LAW

4. GOP To Unveil Bill Thursday, McConnell Promises Senators Will Have 'Adequate Time' To Review It

The legislation has been drafted mostly behind closed doors, and for many Thursday will be the first they see any details of it.

Reuters: After Weeks Of Secrecy, U.S. Senate To Unveil Healthcare Bill

U.S. Senate Republicans plan to unveil the text of their draft healthcare bill on Thursday as senators struggle over issues such as the future of the Medicaid program for the poor and bringing down insurance costs. Republicans in the chamber have been working for weeks behind closed doors on legislation aimed at repealing and replacing major portions of the Affordable Care Act, former Democratic President Barack Obama's signature healthcare law, popularly known as Obamacare. (Cornwell and Cowan, 6/20)

USA Today: McConnell: Senate Bill To Repeal And Replace Obamacare Coming Thursday McConnell said that the bill was being drafted in public and that any senator could have come to working group meetings and given their input during group lunches. But other Republicans — who were in the working groups designated with drafting the bill — disagreed. (Collins, 6/20)

Los Angeles Times: Senate Republicans Promise To Unveil Obamacare Overhaul Thursday, With

Votes Expected Next Week

The Republican leader can spare only two GOP votes from his slim 52-seat majority for passage, presuming Vice President Mike Pence would cast the tie-breaking vote. Pence and Health and Human Services Secretary Tom Price both attended the Republican senators' lunch Tuesday in a show of support. (Mascaro and Memoli, 6/20)

The Washington Post: Senate GOP Leaders Will Present Health Bill This Week, Even As Divisions Flare

McConnell's desire to wrap up before the Fourth of July recess reflects the sense of urgency among Republicans, including President Trump, to show progress on health care after years of vowing to "repeal and replace" the Affordable Care Act. But McConnell's strategy for achieving that goal — writing a bill with a handful of aides behind closed doors — has come at a cost that reached new heights on Tuesday: anger among Republicans who feel shut out of the process. (Sullivan, Eilperin and Snell, 6/20)

The Hill: McConnell: Healthcare Bill To Be Revealed Thursday

When asked how long lawmakers will have to review the legislation, the majority leader vowed that they would have "plenty of time." "I think this will be as about as transparent as it can be," he said. (Bolton, 6/20)

Atlanta Journal-Constitution: Republicans To Unveil Revised Senate GOP Health Care Bill On Thursday

"For weeks now we've been in intense discussions with all Republican Senators," McConnell said, defending the decision to proceed without any public hearings on the GOP proposal – the details of which remain secret. (Dupree, 6/20)

WBUR: Senate Health Care Bill To Be Released On Thursday

McConnell swatted away the Democratic senators' concerns, saying that health care has always been a highly partisan issue. He referred back to the contentious passage of Obamacare in 2010. McConnell continued, "Obamacare continues to collapse. Republicans are working to implement better ideas. Democrats are trying to prevent Congress from acting. I regret that Democrats announced their intention early on that they didn't want to be part of a serious bipartisan process to move past the failures of this law. Congress still has a responsibility to act." (O'Keefe and Chakrabarti, 6/20)

5. McConnell's Political Gamble: Wily Strategist Likely To Hold Vote Despite Uncertainty Over Passage

There's a razor-thin margin of error in the Senate to get to a "yes" next week on the chamber's version of the health care bill. Not even Senate Majority Leader Mitch McConnell (R-Ky.) is certain about its chances. Meanwhile, public opposition to the bill continues to rise.

The Associated Press: GOP Eyes Senate Health Care Vote Next Week, Amid Grumbling

Republicans are angling toward a Senate vote next week on their marquee effort to erase much of President Barack Obama's health care law. But there's plenty of grumbling from senators across the GOP spectrum, and leaders haven't yet nailed down the support they'll need to prevail. Sen. Ted Cruz of Texas said Tuesday that there's "more work to do" before the bill adequately cuts premiums. A second conservative, Utah's Mike Lee, complained about not seeing the legislation despite being on the working group of senators assigned to craft it and said lawmakers should have seen the measure "weeks ago" if they're to vote next week. And Alaska moderate Lisa Murkowski said she didn't know how she'd vote, adding, "I have no idea what the deal is." (6/21)

Politico: Fate Of Obamacare Repeal Uncertain In Senate

The GOP plan to jam through a bill over the next 10 days amounts to a rare political risk by McConnell with no guarantee of success — and one that could jeopardize his Senate majority long-term if the bill ends up being viewed as poorly as the House-passed bill, which has a 17 percent approval rating. McConnell himself wouldn't guarantee passage on Tuesday, or even commit to a vote next week, though that is his plan. (Everett and Haberkorn, 6/20)

Politico: How McConnell Gets To 50 Votes To Repeal Obamacare

Senate Majority Leader Mitch McConnell needs to nail down 50 GOP votes to repeal Obamacare. He has no easy options. He can lean toward conservatives like Rand Paul of Kentucky and Mike Lee of Utah, who want to dismantle as much of Obamacare as they possibly can. But if he does that, he risks losing a group of Senate moderates, including Susan Collins of Maine, Lisa Murkowski of Alaska, Rob Portman of Ohio and Shelley Moore Capito of West Virginia, who are pushing for a slower phase-out of the Medicaid expansion that is covering low-income people in some of their states. (Haberkorn, 6/20)

The Wall Street Journal: Alaska Senator Lisa Murkowski Faces Hard Sell On Health Bill

Senate Republicans' quest for the 50 votes needed to pass their health-care bill has put them in hot pursuit of one duck-hunting, occasionally defiant GOP senator: Lisa Murkowski of Alaska. Senate Majority Leader Mitch McConnell (R., Ky.) confirmed Tuesday that the bill's text would be released Thursday and a vote held likely next week, triggering an intensified effort to secure the votes of senators like Ms. Murkowski. An assessment of the bill's impact by the nonpartisan Congressional Budget Office is expected by early next week. (Peterson and Armour, 6/20)

CQ HealthBeat: Senate Health Care Bill Begins Taking Shape

Senate Republican leaders appeared late Tuesday to be settling on a strategy for bringing a major health care bill to the floor. A summary circulating among lobbyists Tuesday night would tilt in conservatives' direction on many items with one particularly notable exception: the omission of language expanding limits on abortion and defunding Planned Parenthood. Republicans did not confirm the details that lobbyists were sharing, which may be outdated and may change during the next couple of days of negotiations. But the information provides the first glimpse of what Senate Republicans have been constructing during weeks of closed-door discussions. (Williams, Young and McIntire, 6/20)

The Hill: White House: Trump Wants GOP ObamaCare Repeal To 'Have Heart'

White House press secretary Sean Spicer on Tuesday doubled down on President Trump's reported remarks that the House GOP's healthcare bill lacks "heart." Asked during a press briefing to confirm the remarks and explain what Trump wants to see in the final bill to repeal and replace ObamaCare, Spicer said Trump "clearly wants a bill that has heart in it." "This is an area that the president believes passionately about." Spicer told reporters. (Bowden, 6/20)

The Hill: Health Plans Slam Medicaid Cuts In Emerging Senate Bill

Ten of the country's largest health plans are calling on Senate Republicans to reconsider the Medicaid changes under discussion as part of ObamaCare repeal. The proposals being discussed "do not enact meaningful, needed repairs to the ACA," the plans said in a letter to both Majority Leader Mitch McConnell (R-Ky.) and Minority Leader Charles Schumer (D-N.Y.), referring to the Affordable Care Act. A leading option in the Senate's ObamaCare repeal-and-replace debate is to make even deeper cuts to Medicaid spending than the bill passed by the House. Under the proposal, the federal government would put a cap on its share of Medicaid payments to states beginning in 2020. (Weixel, 6/20)

Politico: Poll: Opposition To GOP Health Bill Is On The Rise

Opposition to the Republican health bill is growing, according to a new POLITICO/Morning Consult

poll. As the GOP-led Senate prepares to take up the measure, only 35 percent of voters surveyed approve of the bill passed by the House last month. Nearly half of voters, 49 percent, disapprove of the bill. The other 16 percent don't know or don't have an opinion, the poll shows. (Shepard, 6/21)

Kansas City Star: Kansas City Families With Stake In AHCA Concerned About Possible Senate Vote

Supporters of the Republican bill say that it will encourage states to find innovative ways to maintain coverage for those who need it most while curbing unsustainable cost increases. Other groups are concerned about the bill allowing states to give health insurers the freedom to charge more based on pre-existing conditions and the end of the Medicaid expansion program that provided federal cash to extend health coverage to low-income people in states that opted in. (Marso, 6/20)

In other news from Capitol Hill -

Roll Call: Ivanka Trump, Senators Hope To Push Family Tax Credits

A group of Senate Republicans met with Ivanka Trump on Tuesday to begin constructing a tax credit package that could include family leave and other child care proposals. Florida Sen. Marco Rubio, who touted paid family leave during his 2016 presidential run, said lawmakers and President Donald Trump's eldest daughter discussed a variety of tax proposals meant to benefit families, particularly those who are low-income. (Wilkins, 6/21)

6. Money To Fight Opioid Epidemic Could Be Deciding Factor For Health Bill's Chances

Senators from states that have been particularly hard hit by the opioid crisis are drawing a line in the sand over funding to curb the epidemic.

The New York Times: G.O.P. Rift Over Medicaid And Opioids Imperils Senate Health Bill A growing rift among Senate Republicans over federal spending on Medicaid and the opioid epidemic is imperiling legislation to repeal the Affordable Care Act that Senate leaders are trying to put to a vote by the end of next week. President Trump had urged Republican senators to write a more generous bill than a House version that he first heralded and then called "mean," but Republican leaders on Tuesday appeared to be drafting legislation that would do even more to slow the growth of Medicaid toward the end of the coming decade. (Pear and Steinhauer, 6/20)

The Associated Press: GOP Medicaid Cuts Would Hit States Fighting Opioid Epidemic

The Republican drive to roll back Barack Obama's health care law is on a collision course with a national opioid epidemic that's not letting up. Medicaid cuts resulting from the GOP legislation would hit hard in states deeply affected by the addiction crisis and struggling to turn the corner, according to state data and concerned lawmakers in both parties. (Alonso-Zaldivar, 6/21)

The Wall Street Journal: Democratic Senators Say Opioid Treatment Would Take Hit Under GOP Health Plan

A pair of Senate Democrats in states hard hit by opioid addiction say the Republican effort to replace the Affordable Care Act would undermine efforts to battle the epidemic, arguing the prospect of extra opioid treatment funding wouldn't sufficiently replace insurance coverage that would be lost if Medicaid's expansion were reversed. Sen. Bob Casey (D., Pa.) released a report arguing Republican-proposed cuts to Medicaid funding would worsen the country's growing opioid problem because many people use their Medicaid insurance to cover addiction treatment. He was joined at a news conference Tuesday by Sen. Joe Manchin (D., W.Va.). (Nunn, 6/20)

Modern Healthcare: Senate Repeal Bill's Fate May Hinge On Funding For Addiction Treatment

Two moderate Republican senators from states hit hard by the opioid addiction epidemic are pushing to add a reported \$45 billion in 10-year funding for substance abuse services to the Senate bill to repeal and replace the Affordable Care Act. ... But Senate GOP leaders may have to seriously consider their request because both senators, Shelley Moore Capito of West Virginia and Rob Portman of Ohio, doubt whether they can support the bill. (Meyer, 6/20)

Stat: Addiction Experts Say GOP Plan To Replace Medicaid Spending Won't Help

Addiction experts have warned that Republican proposals to dramatically cut Medicaid funding could worsen the nation's growing opioid crisis. So a pair of GOP senators is pushing for a solution: a massive influx of money for treatment to help stave off those effects. But that makeshift effort may also fall flat, advocates in the recovery community say. Republican Sens. Rob Portman of Ohio and Shelley Moore Capito of West Virginia, whose states have been devastated by the nation's opioid epidemic, have suggested in recent interviews they hope to add into the Republican package to repeal and replace Obamacare as much as \$4.5 billion each year for the next 10 years in new funding for addiction treatment. (Mershon, 6/21)

7. By Opting For Secrecy, GOP Dodged Headaches Transparency Would Have Brought

Although the strategy kept dissent down, it caused frustration even among Republicans.

Politico: Secrecy Boosts GOP's Obamacare Repeal Push

Senate Republicans are closer than ever to voting to repeal Obamacare after three months of work that's unparalleled in its secrecy and speed. They're unapologetic, though. Because so far, it's working. The closed-door deliberations, which have left even some GOP senators in the dark, have prompted widespread charges of hypocrisy and even a fair amount of heartburn within a party that railed for seven years against Democrats' rush to pass their 2010 health care reform law. (Cancryn, 6/20)

Bloomberg: GOP Health Bill Kept Secret From Senators Assigned To Write It

One of the Senate Republicans charged with negotiating an Obamacare replacement expressed frustration Tuesday with the secret process, saying that even he hasn't seen the proposal set to be released in two days for a possible floor vote next week. ... A week or so to examine the bill isn't enough, said [Utah Senator Mike] Lee in a video posted on his Facebook page. As one of about a dozen members of a health-care working group, he criticized the closely held process of drafting the measure. (Litvan, 6/20)

CQ Roll Call: GOP Senators Wait To See Republican Health Bill Text

Republican senators say they expect to see the text of their party's health care bill within days, although it's still far from clear what it will contain. Discussions continue about proposals, including the approach for reducing federal Medicaid payments. Senate Majority Leader Mitch McConnell of Kentucky said he expects to have a discussion draft of legislation to revamp the 2010 health care law available on Thursday, and the Senate will likely proceed to the measure next week, assuming a Congressional Budget Office estimate is complete. (Young, 6/20)

The Hill: Senate Republicans Criticize Own Party's Healthcare Process

Several Senate Republicans are criticizing their own party for negotiating and writing an ObamaCare repeal-and-replace bill largely behind closed doors and without input from Democrats. "Healthcare is such an important thing. I think we should have debated it in open, in committee hearings, have both sides bring in witnesses," Sen. Rand Paul (R-Ky.) said Tuesday. (Sullivan, 6/20)

Politico: 11 Times Republicans Said Obamacare Process Was Too Secretive

Senate Republicans have come under fire from Democrats and even some in their own party for crafting their Obamacare replacement plan in secret, without public hearings to debate the legislation they have promised to voters for years. But not long ago, leaders in the Republican Party skewered President Barack Obama and Democrats in Congress for writing the Affordable Care Act "behind closed doors" and in "smoke-filled rooms," as Vice President Mike Pence, at the time a lawmaker from Indiana, put it. (Lahut, Siu and Tesfamichael, 6/20)

Politico: Senate Democrats Go Searching For GOP Obamacare Bill

Senate Democrats are struggling against an invisible enemy — the GOP's still-secret Obamacare repeal plan. So on Tuesday, three of them decided to take a field trip to hunt for it. Sens. Cory Booker of New Jersey, Chris Murphy of Connecticut and Brian Schatz of Hawaii headed across the Hill to the Congressional Budget Office, located in Southwest Washington about a 10-minute drive from the Capitol, in what they acknowledged would be a fruitless quest for a copy of the health care bill that Republicans expect to bring to a vote as soon as next week. (Schor and Kim, 6/20)

MARKETPLACE

8. Despite Threats To Cut Them Off, Trump Administration Makes Insurer Payments For June

The insurers, however, want a more permanent guarantee on the subsidies. Meanwhile, The New York Times looks at who would be hurt the most if the payments stopped.

The Wall Street Journal: Trump Administration Makes ACA Payments To Health Insurers For June The Trump administration made contested payments to health insurers for the month of June, removing the possibility of an abrupt cutoff just as many insurers make decisions about coverage under the Affordable Care Act in 2018. The fate of "cost-sharing reduction" payments, which reimburse health plans for lowering copays and deductibles for millions of low-income people who get coverage under the 2010 law, often dubbed Obamacare, has been a running backdrop in the debate over Republicans' bid to scrap that law. Senate GOP leaders intend to vote next week on legislation to repeal portions of the act. (Radnofsky, 6/20)

The Hill: Trump Administration Pays June ObamaCare Subsidies To Insurers

The payments, known as cost sharing reduction subsidies, reimburse insurers for providing discounts to low-income patients. Insurers have been threatening to raise premiums — or leave the ObamaCare markets — if they don't receive certainty about the payments from Congress or the White House. (Hellmann, 6/20)

CQ Roll Call: HHS Made June Obamacare Subsidy Payments, Official Says

Insurers — who face a deadline of Wednesday for filing rates in states served by Healthcare.gov — call the payments essential for the success of the marketplaces but administration officials have been coy about whether they would continue paying them. President Donald Trump had said he wanted to use the CSR payments as a tool in health care negotiations. Some issuers that have already filed their rate requests in certain states have pointed to the uncertainty around the payments as a key reason for asking to increase premiums by double digits. (McIntire, 6/20)

The New York Times: Middle Class, Not Poor, Could Suffer If Trump Ends Health Payments

Jane and Abe Goren retired here five years ago to escape the higher cost of living they had abided for decades in the suburbs of New York City. They did not anticipate having to write monthly checks for health insurance that would exceed their mortgage and property taxes combined. Ms. Goren, 62,

is paying nearly \$1,200 a month for coverage through the individual insurance market (her husband, 69, is on Medicare) and accumulating enough debt that her sons recently held a fund-raiser to help. For next year, her insurer, Blue Cross and Blue Shield of North Carolina, has proposed raising premiums by an average of 22.9 percent, a spike it is blaming squarely on President Trump. (Goodnough, 6/20)

9. Today Is Deadline For Insurers To Commit To Sell In 2018's 'Very Challenged' Obamacare Market

Concerns continue that pockets across the country will lack insurers or competition. But while some titans of the industry debate whether to sell on the health law exchanges next year, one startup -- Oscar -- is planning to expand its territory.

Politico: Looming Obamacare Deadline Forces Decision From Skittish Insurers

Decision day is here for the health insurers that serve Obamacare markets. The health plans must decide by Wednesday whether to file plans to sell through the federal exchange HealthCare.gov in 2018. But they're still waiting for assurances the Trump administration will fund subsidies to reduce low-income customers' health costs. The White House on Tuesday agreed to make the payments for June. But uncertainty over what happens after that is turning efforts to cover Obamacare's poorest customers into a game of chicken — and adding instability to already shaky insurance markets. (Demko, 6/20)

The Wall Street Journal: Insurance Startup Oscar Raises Its Bet On Affordable Care Act

Insurance startup Oscar Insurance Corp. said it plans to expand its offerings in the Affordable Care Act marketplaces, as insurers face a federal deadline Wednesday for initial filings to participate in the health law's exchanges next year. Oscar, which has been under a spotlight partly because of its tie to the Trump administration, said it aims to begin selling ACA plans in Tennessee for the first time in 2018, and re-enter the exchange in New Jersey, where it sat out this year. The insurer also will expand the regions where it sells ACA plans in California and Texas. (Wilde Mathews, 6/21)

Nashville Tennessean: Insurer Start-Up Oscar Health Preps To Sell 2018 Obamacare Plans In Nashville

Health insurance start-up Oscar Health is gearing up to sell individual plans in the greater Nashville area in 2018, an expansion into the Southeast that will give area residents a second option on the Obamacare exchange. The company will formally apply on June 21 with the Tennessee Department of Commerce and Insurance for approval to be an insurer in nine counties. Oscar, if its application is successful, will ensure that Tennesseans have a second insurance choice in 2018 even with Humana's planned departure. Cigna is expected to remain on the federally-run marketplace. (Fletcher, 6/21)

USA Today: Insurers Make Obamacare Deadline Decisions, But Can Still Drop Out

A relative newcomer to health insurance intends to enter or expand on the Affordable Care Act exchanges in five states at today's filing deadline, improving the outlook for Obamacare but hardly eliminating the grave threat Trump administration-spawned uncertainty poses. Oscar Health, started in 2012, joins insurer Centene which last week announced plans to sell ACA plans in Kansas, Missouri and Nevada and to expand in six other states. The news comes as even insurers that have announced their plans to sell ACA plans publicly reserve their right to change their minds. (O'Donnell, Fletcher and Gluck, 6/21)

Nashville Tennessean: BCBST, Cigna On Tap To Sell Obamacare Plans In 2018

BlueCross BlueShield of Tennessee and Cigna have officially lined up to sell individual insurance in Tennessee for 2018. BlueCross BlueShield of Tennessee submitted preliminary filings to sell plans

next year to the Tennessee Department of Commerce and Insurance on June 20. BCBST plans to sell individual insurance in most parts of the state. The insurer is preparing to re-enter the greater Knoxville market, which was temporarily without an insurer for 2018 after Humana announced plans to exit. It will not be in the greater Memphis or Nashville areas. (Fletcher, 6/20)

Modern Healthcare: Dozens Of Counties Lack An Insurer Ahead Of HealthCare.Gov Rate-Filing Deadline

Ahead of this week's deadline for insurers to file 2018 HealthCare.gov rates, dozens of U.S. counties lack health insurance options. Insurers must say on Wednesday whether they plan to sell coverage on the Affordable Care Act's insurance exchanges next year. The deadline is the first look at the state of the federal marketplace for 2018: how much rates could go up and which counties are at risk of having no insurers. (Llvingston, 6/20)

Chicago Tribune: Blue Cross Working To Return To Illinois Obamacare Exchange Next Year Illinois' largest health insurer, Blue Cross and Blue Shield of Illinois, is taking steps to return to the Obamacare exchange next year despite uncertainty over the fate of the health care law. The news comes as some insurers in other parts of the country pull out of the marketplace for 2018. In Illinois, insurers have until Wednesday to file proposed rates with the Illinois Department of Insurance. Colleen Miller, a spokeswoman for Blue Cross, confirmed Monday the insurer is submitting rates and plans for next year. (Schencker, 6/20)

Denver Post: Easing Fears, Anthem Announces Plan To Participate In Colorado Health Insurance Exchange In 2018

Health insurance giant Anthem announced late Monday that it has submitted proposed 2018 plans to the state, easing fears that it might back out of Colorado's health insurance exchange and leave residents of several counties without an insurance choice. But an Anthem spokesman declined to provide specifics on those plans — including where the company expects to offer them — meaning it remains unclear if Anthem will continue to provide coverage to the same number of Coloradans it currently does. (Ingold, 6/20)

And some employers are also facing stiff insurance cost increases --

Austin American-Statesman: Wilco Employees Face Increases In Healthcare Insurance In 2018 Williamson County commissioners on Tuesday approved paying \$804,000 extra next year to help cover the increased cost of health care insurance for county employees. Employees also face monthly increases on the amount they will pay for health care insurance ranging from \$20 to \$105 based on what plan they use and how many people in their family are covered. (Osborn, 6/20)

CAPITOL HILL WATCH

10. Where Georgia's Newest Congresswoman Stands On Health Care Issues

Karen Handel secured a victory Tuesday night in Health and Human Services Secretary Tom Price's old district.

Stat: 5 Things To Know About Karen Handel And Health Care

Karen Handel defeated Jon Ossoff for the highly contested 6th Congressional District seat in Georgia on Tuesday night. This race was the most expensive congressional race in U.S. history and a key victory for Republicans who want to hold on to their majority despite polls showing their vision for health care is widely unpopular...The 55-year-old Handel, Georgia's former secretary of state, spent much of her campaign praising the American Health Care Act passed by House

lawmakers this past spring. Here are five things to know about Handel's positions on health care issues: (Blau, 6/20)

Roll Call: Trump Mocks Democrats After Elections

Democrats should learn from their latest two House race defeats and work with Republicans to pass health care and tax overhaul legislation, a celebratory President Donald Trump tweeted Wednesday morning. Republicans were victorious Tuesday in special elections in Georgia and South Carolina, with voters sending Karen Handel and Ralph Norman to the House of Representatives. By doing so, Georgians and South Carolinians handed Trump personal victories — and the president responded by declaring himself undefeated in congressional races since taking office. (Bennett, 6/21)

MEDICAID

11. Wisconsin Medicaid Supporters Decry Proposal For Drug Testing As Cruel And Demeaning

Gov. Scott Walker has asked the federal government for permission to start the tests. News outlets also report on Medicaid developments in Texas, Ohio, Georgia and Colorado.

The Associated Press: AP Exclusive: Records Show Scant Support For Walker's Plan

Wisconsin Gov. Scott Walker's proposal to drug-test Medicaid recipients and increase premiums on poor people drew five fully positive comments out of more than 1,000 submitted by the public, with one of the supportive letters coming from his own lieutenant governor, according to a review by The Associated Press. (Bauer, 6/20)

Texas Tribune: Congress Is Eyeing Big Medicaid Cuts. Here's Why It Matters To Texas Families. Texas, which has one of the nation's highest rates of uninsured children — 11 percent, according to a June study by the nonpartisan Georgetown University Center for Children and Families — is especially vulnerable to Medicaid cuts of any type. Almost half of all Texas children with insurance get it through Medicaid. The study also noted that rural children in Texas have disproportionately benefited from health care reforms brought about by Obamacare. In 2009, the year before the landmark reform bill was signed into law, 18 percent of rural Texas children were uninsured. By 2015, that number had fallen to 11 percent. (Wilson, 6/21)

Cleveland Plain Dealer: Ohio Senate Republicans Propose Medicaid Expansion Freeze In 2018 State Senate Republicans want to freeze Medicaid expansion enrollment after July 1, 2018, as Congress debates the future of the program under the Affordable Care Act. Before then, the state would hold a year-long open enrollment period for enrollees, who earn less than 138 percent of the federal poverty level. (Borchardt, 6/20)

Atlanta Journal-Constitution: Georgia Pursues Medicaid Funding For School Nurses

Georgia health officials may go after \$48.6 million in federal healthcare funding for schools even as threatened Medicaid cuts in the Obamacare replacement could undermine school budgets. The Department of Community Health board will vote next month on a plan to harness Medicaid to pay for more nurses in schools. (Tagami, 6/20)

Denver Post: Colorado Budget Lawmakers Grill Medicaid Department Over Failure To Pay Doctors, Clinics, Therapists

Lawmakers demanded answers Tuesday from state Medicaid officials over the botched launch of a new computer system that has failed to pay hundreds of doctors, therapists and other health professionals for care they've already provided. The system, which went live March 1, has not paid

an estimated \$53 million in claims made by clinics, doctor's offices, hospitals and therapists for the disabled who care for needy and disabled Coloradans. After nearly four months, the system is paying just 60 percent of claims, the rest denied or suspended because of system glitches and submission errors. (Brown, 6/20)

VETERANS' HEALTH CARE

12. Failures Of VA Pharmacy System Put Patient Safety At Risk, GAO Report Finds

The pharmacy operations are part of the Veterans Affairs Department's soon-to-be-replaced electronic health record system. In other news on veteran health, VA Secretary David Shulkin talks about disparities in access to care depending on a patient's location.

Modern Healthcare: GAO Says VA Pharmacy System Could Put Patients At Risk

The Veterans Affairs Department's pharmacy system could put patient safety at risk due to interoperability limitations, according to a federal report. The system—which is part of the VA's soon-to-be-replaced electronic health record, called VistA—hinders pharmacists' ability to access patient data and to work with non-VA providers' prescriptions, according to the report by the U.S. Government Accountability Office. The agency recommends that the VA modernize its pharmacy services. The VA requested \$7.7 billion in fiscal 2017 for these services. (Arndt, 6/19)

CQ Roll Call: Private Health Care For Veterans May Depend On Locality

Veterans Affairs Secretary David Shulkin told reporters Tuesday that in the future, private health care available to veterans may vary depending on where they live. "So health care is local just like many businesses are, so we're asking each of our regions to do an assessment about what exists in their community and what exists in their VA services in their community, and come up with a strategic direction for that locality," Shulkin said at the Christian Science Monitor Breakfast. The VA health care system is divided into geographic regions. (Mejdrich, 6/20)

PUBLIC HEALTH AND EDUCATION

13. They're Going To Addiction Treatment Centers For Help And 'Leaving In Body Bags'

Hoping for a fresh start, thousands of young people addicted to opioids are winding up in Florida in places that benefit from relapse rather than the recovery they advertise. Meanwhile, a new study finds that hospitalization rates are skyrocketing because of the crisis.

The New York Times: Haven For Recovering Addicts Now Profits From Their Relapses

It was the kind of afternoon that cold-weary tourists revel in as they sip mojitos near the beach — a dazzling sun, a sky so blue it verged on Photoshopped and weather fit for flip-flops. But the young visitor from Arkansas, curled up into a ball near the sidewalk, had a better reason to be grateful. He was alive. "You are overdosing on heroin," Sean Gibson, a paramedic captain with the Delray Beach Fire-Rescue, had told him earlier this year, after the man fell off his bike, hit a chain-link fence and collapsed, blood trickling down his face. (Alvarez, 6/20)

Los Angeles Times: Hospitalization Rate For Opioid Abuse Doubled In 10 Years, Report Says The opioid epidemic continues to devastate Americans, and a new report shows that it has only

gotten worse in recent years. In 2014, abuse of prescription painkillers such as OxyContin and street drugs such as heroin sent users to hospitals at record rates. That is true in emergency rooms, and even more true in rooms for patients who have been admitted to the hospital. (Netburn and Kaplan, 6/20)

The Oregonian: Oregon Hospitalizations For Opioids Skyrocket

Hospitalizations in Oregon for opioid-related issues more than doubled over the past decade, a new report shows. Over 12,000 people were admitted to an Oregon hospital for opioid dependence, abuse and overdose in 2014, according to the Agency for Healthcare Research and Quality. That compares with just over 5,000 in 2005. Hospitalizations nationwide skyrocketed as well, soaring nearly 65 percent to 712,000 patients in 2014. Emergency department visits nearly doubled, affecting more than 560,000 people the same year. (Terry, 6/20)

And in other news —

Cincinnati Enquirer: City Taxpayers To Fund Needle Exchange Program

Cincinnati City Council added a needle exchange program into the proposed 2018 budget, salvaging a program health officials say prevent the spread of Hepatitis C and HIV. The University of Cincinnati-based program, which allows users to trade used needles for clean needles, had been privately funded by Interact for Health, a 20-county non-profit health agency. (Coolidge, 6/20)

WBUR: Harsh Reception For Supervised Drug Injection In Boston

If the first public hearing is any indication, Boston supporters of rooms where drug users would inject under medical supervision have a long road ahead of them. Passions ran high before the hearing on bringing supervised injection facilities, or SIFs, to Boston even began Monday. (Bebinger, 6/20)

14. As Extra Pounds On Kids Becomes New Normal, Task Force Issues Obesity Screening Guidelines

The Los Angeles Times looks at why the new advice is important. In other public health news: food as an anti-cancer weapon, care for adults who had childhood diseases, and talcum powder.

Los Angeles Times: Here's Why Experts Say All Kids Ages 6 And Up Should Be Screened For Obesity

With obesity still rising among certain groups of kids, a government panel is renewing its advice that all children and adolescents ages 6 to 18 be screened for obesity. Screening is just the first step. Kids who are obese should then be referred to treatment programs that use a variety of approaches to change their behavior and help them slim down. (Kaplan, 6/20)

The Washington Post: U2's The Edge Talks Up Food As An Anti-Cancer Weapon

The lead guitarist of U2, the rock band playing at FedEx Field on Tuesday night, has more on his mind than music. In 2006, The Edge's 7-year-old daughter was diagnosed with leukemia, something that he says sent him "into a complete tailspin." Sian recovered and is now 19. The experience heightened the legendary musician's interest in health and cancer, and especially in angiogenesis, which focuses on the formation of blood vessels. In recent years, several antiangiogenesis drugs have been developed to disrupt the blood supply that cancers need to grow. (McGinley, 6/20)

NPR: Survivors Of Childhood Disease Face Health Risks As Adults

Rachael Goldring was born with congenital heart disease. Had she been born a few decades earlier, she probably would have died as a baby. Goldring is now 24, and among a population of patients who present new challenges to a health care system unaccustomed to dealing with survivors of once-

fatal conditions. Today there are more adults than kids living with some of these diseases, and medical training lags behind. Young adults who can't find suitable doctors may drop out of care, and their conditions may worsen. (Klein, 6/21)

The Associated Press: High Court Ruling May Hurt Claims Of Talc Link To Cancer

A Supreme Court ruling this week could have a "chilling effect" on the many lawsuits filed in St. Louis claiming talcum powder causes a deadly form of cancer in women, including cases under appeal in which stricken women and their survivors have been awarded more than \$300 million, experts said Tuesday. (Salter, 6/20)

15. Though Fervor Over Zika Has Faded, Experts Warn Vigilance Is Still Needed

A new study shows an increase in Zika-carrying mosquitoes across the South.

The Washington Post: More U.S. Counties Are Finding Zika-Carrying Mosquitoes

With the summer mosquito season in full swing in many U.S. states, a new report shows a significant increase in counties across the South that have reported mosquitoes capable of spreading Zika and related viruses. Two types of mosquitoes are the primary transmitters of Zika, dengue, yellow fever and chikungunya viruses. Based on updated data collected through 2016, research from the Centers for Disease Control and Prevention found that 38 additional counties — primarily in Texas but as far north as Illinois — documented the presence of Aedes aegypti mosquitoes, Zika's main vector. That's an increase of 21 percent compared with an earlier 2016 survey. (Sun, 6/20)

Miami Herald: Mosquitoes That Spread Disease Reported In More Counties

Two mosquito species known to carry chikungunya, dengue and Zika viruses have been reported in more counties and states across the Southern United States, according to new research and surveillance data collected by the Centers for Disease Control and Prevention in 2016... Though more counties and states reported the presence of these mosquitoes in 2016, that does not mean the mosquitoes are entering new areas, said Tom Skinner, a CDC spokesman. (Chang, 6/20)

Kaiser Health News: A Clinic Mix-Up Leaves Pregnant Woman In Dark About Zika Risk

Hospital officials in Washington state have apologized after failing for months to inform a pregnant woman she was likely infected with the Zika virus that can cause devastating birth defects. Andrea Pardo, 33, of Issaquah, Wash., was tested for the virus in October, after becoming pregnant while living in Mexico. The results were ready by December, but Pardo wasn't notified until April — 37 weeks into her pregnancy, just before she delivered her daughter, Noemi. So far, the baby appears healthy. But the delay, blamed on a mistake at the University of Washington clinic where Pardo received care, deprived her of the chance to make an informed choice about her pregnancy, she said. (Aleccia, 6/21)

WOMEN'S HEALTH

16. Abortion-Rights Groups File Suit Over Ark. Laws For Creating 'Burdensome Bureaucratic Hurdles'

Similar bans are in effect in Mississippi and West Virginia, while restrictions in Alabama, Kansas, Louisiana and Oklahoma have been blocked by court rulings.

The Associated Press: Groups File Lawsuits Over New Arkansas Abortion Restrictions Abortion-rights groups asked a federal court Tuesday to block Arkansas from enforcing new restrictions lawmakers approved this year, including a ban on a commonly used second-trimester procedure that the groups say would make it nearly impossible for many women in the state to have an abortion. (DeMillo, 6/20)

The Washington Post: ACLU, Planned Parenthood Challenge New Arkansas Abortion Regulations

The lawsuit aims to block four Arkansas laws that are scheduled to take effect later this year, among them a ban on a common abortion method during a woman's second trimester of pregnancy known as dilation and extraction. The regulations also would prompt providers to notify — and seek consent from — a woman's partner or family member before an abortion and would increase the amount of medical records doctors must request before an abortion to ensure a woman is not seeking an abortion based on the gender of the fetus. The new Arkansas laws also would require providers to more extensively collect and preserve fetal tissue from abortions performed on minors, should local police need it for evidence in an investigation, according to the lawsuit. (Ockerman, 6/20)

Meanwhile, in New York —

The Wall Street Journal: N.Y. Lawsuit Seeks To Protect Abortion-Clinic Patients

New York state Attorney General Eric Schneiderman on Tuesday filed a lawsuit against anti-abortion protesters who he said harass women outside a Queens health clinic, calling them murderers and carrying posters of mangled fetuses. The suit, filed in the U.S. District Court for the Eastern District of New York, alleges that anti-abortion protesters have tried to block the entrance to the Choices Women's Medical Center, and have physically and verbally harassed patients in an attempt to impede access to reproductive services. (Alfaro, 6/20)

STATE WATCH

17. Mass. Gov. Presents Plan To Push Businesses To Pay More Of State's Rising Medicaid Expenses

In other state legislative news, a recently signed Texas bill would alter the state's Teacher Retirement System health care plan. Outlets also report on developments from Connecticut, Ohio, Michigan and Kansas.

Boston Globe: Baker Scales Back Plan For Health Care Fee On Employers

Governor Charlie Baker's push to compel businesses to cover more of the state's ever-rising health care costs gained momentum Tuesday after his administration scaled back a controversial plan that had angered business leaders. Administration officials asked lawmakers to allow an increase to an existing fee on employers to raise an estimated \$200 million annually for health coverage. (Dayal McCluskey and Chesto, 6/20)

WBUR: Baker Submits Compromise Proposal For Employers To Help Pay For Rising Health Care Costs

Employers would be counted on to pay \$200 million more a year over the next two years to help pay for rising expenses in the state's \$16.6 billion Medicaid program under a plan the Baker administration presented to the Legislature Tuesday to balance next year's budget. The plan, a sweeping package of insurance reforms and temporary assessments, calls for a two-tiered assessment on companies, with the bulk of the burden falling on employers with non-disabled workers who enroll in MassHealth. (Murphy, 6/20)

Houston Chronicle: Recently-Signed Texas Bill Drastically Alters Health Coverage For Retired Teachers Younger Than 65

Retired teachers and their families in some cases are covered by the Teacher Retirement System (TRS) health care plan. With this new bill, teachers under the age of 65 with the TRS plan will have to pay higher premiums and deductibles starting January 2018. (Leighton, 6/20)

Columbus Dispatch: Immigrant Benefit Ban Removed From Ohio Workers' Comp Budget

The Senate rejected on Tuesday a controversial provision that would have denied workers' compensation benefits to undocumented workers who are injured on the job. House Republicans added the amendment last month to the Bureau of Workers' Compensation budget over objections from Democrats. (Seigel, 6/20)

The CT Mirror: Health Care Providers Endorse Call For Sales Tax Increase

Health care providers joined social services advocates Tuesday to again urge broadening the state sales tax and adding other revenue sources rather than making big cuts in the upcoming budget. Gov. Dannel P. Malloy and the legislature are trying to close a \$5.1 billion deficit in the next two-year state budget. (Werth, 6/20)

KCUR: Kansas Lawmakers Boost Some Spending On Mental Health System

In voting for a \$1.2 billion tax increase to bolster the budget for the next two years, the Kansas Legislature avoided a projected \$900 budget hole and began restoring past cuts to the mental health system. The final budget bill that lawmakers approved earlier this month includes funding to partially restore cuts to community mental health centers over the past decade, but offers a mixed picture for the two state psychiatric hospitals. The bill also designates \$4.7 million to reopen 20 beds at Osawatomie State Hospital or to pay another facility to make them available through a contract. (Wingerter, 6/20)

The Associated Press: Michigan Legislature Approves Anti-Genital Mutilation Bills

Doctors and parents involved in female genital mutilation could go to prison for up to 15 years under bills overwhelmingly approved Tuesday by lawmakers in Michigan, who said harsher penalties are needed in a state where the first federal prosecution of the practice is ongoing. (6/20)

18. State Highlights: Pa. Hospital 'Super Users' Run Up \$1.25B Tab; Mass. Dentists Charge Delta Dental Violated Nonprofit Rules

Media outlets report on news from Pennsylvania, Massachusetts, Kansas, Georgia, California, Tennessee and New York.

The Philadelphia Inquirer/Philly.com: Hospital Super-Users Cost \$1.25 Billion In Pa.

Efforts to keep chronically ill patients from going to the hospital as often seem to be making a difference in the Philadelphia area and throughout Pennsylvania, according to a new state report on hospital "super-utilizers." The number of these patients, defined as those admitted to a hospital at least five times in a year, has declined since 2012, dramatically so in Philadelphia. But they still ring up a big tab, according to the report by the Pennsylvania Health Care Cost Containment Council. (Avril, 6/20)

Boston Globe: Dentists Accuse Delta Dental Of Violating Nonprofit Rules, Seek Investigation

A group of dentists at odds with the state's largest dental insurer are accusing the company of violating nonprofit rules and engaging in anticompetitive behavior, and they're asking Attorney General Maura Healey's office to investigate. The dentists detailed their complaints against Delta Dental of Massachusetts in an 11-page letter to Healey, penned by their lawyer, James C. Donnelly Jr. of the firm Mirick O'Connell in Worcester. (McCluskey, 6/20)

KCUR: Telemedicine Could Expand Health Care Access In Kansas, But Insurers Balk At Payment

Parity

When evening falls, Brian Hunt makes his way to a comfortable chair in a sun room on the south side of his house near La Cygne, Kansas. But he's not settling in to relax. He's going to work. Hunt is a doctor who works the overnight shift admitting and monitoring patients through video connections at half a dozen hospitals scattered across Kansas. Sitting in front of his computer, wearing a headset and microphone, he greets a 63-year-old woman who's just been transferred to Newton Medical Center from the smaller town of Marion. She's been having difficulties with speech and movement on her right side. (Thompson, 6/20)

WABE: An Ongoing Fight For More Control Over Birth In Atlanta

When DeKalb Medical changed its policy on VBACs last year, it left patients like [Ashley] Brown feeling like they had nowhere to go. It's kind of a rare service, and some traveled from out of state just to find a facility where VBACs are offered. (Lagen, 6/20)

San Francisco Chronicle: SF Supervisors OK Ban On Sale Of Flavored Tobacco

The San Francisco Board of Supervisors unanimously passed a citywide ban on the sale of flavored tobacco products Tuesday, saying the candy tinctures and bright-colored wrapping help lure children into a life of addiction. But the law met resistance from small grocers and smoke shop owners — many of them immigrants — who are grappling with other taxes and costs, including tobacco retailer licenses, cigarette litter abatement fees and the new \$2-per-pack cigarette tax that state voters approved last year. (Swan, 6/20)

Nashville Tennessean: New Lawsuit: Nashville Jail Ignored Scabies Outbreak As Disabled Inmates Suffered

Officers at Nashville's privately run jail ignored inmates suffering from a scabies outbreak, leaving vulnerable inmates particularly exposed, states a third federal lawsuit seeking class action status. The lawsuit, filed Monday in Nashville federal court, also alleges officers at the Metro-Davidson County Detention Facility joked any lawsuit would fail because local judges have money invested in jail operator CoreCivic, a Nashville-based private prison company previously known as Corrections Corporation of America or CCA. (Boucher, 6/20)

WABE: Monitoring Beginning In Ga. Community Near Nuclear Sites

Researchers are starting an environmental monitoring program in the Georgia community of Shell Bluff. The community is south of Augusta on the Savannah River, near a nuclear power plant and a federal nuclear facility. (Samuel, 6/20)

The New York Times: A Founder Of The Children's Health Fund Packs Up His Doctor's Bag In 1986, as New York City reeled from a crack epidemic and runaway violence, Paul Simon, the musician, and Irwin Redlener, a doctor, paid a visit to one of the city's notorious welfare hotels, the Martinique in Midtown Manhattan. The two had been working together to raise money and awareness for children in Africa, as part of the "We Are the World" campaign, when it occurred to Mr. Simon that perhaps they could also address urgent needs closer to home. (Santora, 6/20)

PRESCRIPTION DRUG WATCH

19. High Drug Cost Controversy Reflected In Drop Of Expected Sales For First Time In A Decade

News outlets report on stories related to pharmaceutical pricing.

Stat: Pricing Pressure And Patent Expirations Force A Drop In Projected Drug Sales

Ongoing controversy over drug prices and a rising number of patent expirations on some big-selling medicines has prompted a downward revision in global sales over the next five years, according to EvaluatePharma, a market research firm. Last year, the firm forecast global drug sales to hit \$1.12 trillion by 2022, but the pharmaceutical landscape is shifting sufficiently to now expect worldwide sales to reach \$1.06 trillion. Even so, that represents a healthy 6.5 percent compounded annual growth over the upcoming five-year period. (Silverman, 6/20)

Reuters: Worldwide Drug Sale Forecasts Fall As Pricing Pressures Mount

Forecasts for global sales of pharmaceuticals have declined for the first time in a decade as continuing pressure on prices in the key U.S. market has caused analysts to moderate revenue expectations, according to a report on Tuesday. Evaluate Pharma, which compiles consensus numbers based on analysts' forecasts, said worldwide drug sales were now expected to hit \$1.06 trillion in 2022, down from \$1.12 trillion predicted a year ago for the same period. (6/20)

The New York Times: Draft Order On Drug Prices Proposes Easing Regulations

In the early days of his administration, President Trump did not hesitate to bash the drug industry. But a draft of an executive order on drug prices appears to give the pharmaceutical industry much of what it has asked for — and no guarantee that costs to consumers will drop. The draft, which The New York Times obtained on Tuesday, is light on specifics but clear on philosophy: Easing regulatory hurdles for the drug industry is the best way to get prices down. (Kaplan and Thomas, 6/20)

Stat: Turning To The States To Solve The National Problem Of Drug Pricing

Drug pricing is a national problem. So a nonprofit wants to help hand off some of that burden to the states. The National Academy for State Health Policy just launched a new center, called the Center for State Rx Drug Pricing, to help state governments navigate the treacherous waters of drug pricing. It just received about a million dollars in funding from the Laura and John Arnold Foundation to help states get drug pricing initiatives underway. (Keshavan, 6/20)

Modern Healthcare: Increasing Transparency On Generic Drug Cost Data Could Save \$4 Billion Increasing transparency on the cost of generic drugs could save about \$4 billion a year in overall healthcare spending in the U.S., according to a new paper. Making actual generic drug acquisition costs available to third-party payers would empower health plans to negotiate lower rates and essentially level the playing field in a pharmaceutical supply chain that's shrouded in secrecy. Ultimately, patients would pay less at the expense of pharmacy benefit mangers' profits, researchers said. If the average prescription generic drug priced at \$26 was reduced by \$1, that would reduce health spending by \$4 billion every year, data shows. The average price for branded drugs is \$308. (Kacik, 6/15)

Stat: At Pharma's Academy Awards, The Top Prize Went To ... No One

There's a reason you see so many drug ads featuring the same boilerplate images of happy embraces and beautiful landscapes: It's hard to get too creative without running afoul of regulations. That reality was reflected this weekend at the drug industry's Oscars, where a jury at the big annual advertising awards fete in the south of France declined to award the top prize in the pharma category to anyone. It's the second time that's happened since the Cannes Lions Health creative award was first introduced in 2014. (Robbins, 6/18)

Bloomberg: Billionaire John Paulson Joins Valeant's Board Of Directors

Billionaire hedge-fund manager John Paulson bought into Valeant Pharmaceuticals International Inc. stock on its way to the top. Now, he's trying to help push it off the bottom. Paulson will join the board after the noisy exit of another high-profile investor: onetime backer Bill Ackman. The appointment of Paulson, whose firm became Valeant's biggest shareholder after Ackman bailed out in March, could help comfort shareholders that he's sticking with the drugmaker while it tries to rebuild itself after high-profile scandals. (Koons and Weiss, 6/19)

Marketplace: Is Competition The Solution To High Drug Prices?

The U.S. Supreme Court this week unanimously ruled in support of a new class of generic drugs that some argue will inject more competition into the market. The decision coincides with several meetings on the subject of drug pricing — the Senate met on the topic yesterday, while the American Chamber of Commerce will discuss prices today. (Gorenstein, 6/14)

Stat: This Bill Would Reinstate A Controversial Drug Discount For Some Hospitals

A bipartisan bill was introduced in Congress this week in a bid to lower drugs costs for some hospitals, potentially reviving a contentious battle that the pharmaceutical industry appeared to win nearly two years ago. The legislation would restore a coveted discount for some 1,200 rural hospitals and a handful of cancer-care hospitals when purchasing drugs with so-called orphan designations, which are granted to medicines for treating rare diseases. A court ruling in 2015 had eliminated the price break. (Silverman, 6/16)

Atlanta Journal-Constitution: Hospitals Don't Have To Pass Drug Savings Along To Patients

The evolution of 340B represents one of the many oddities of health care financing. In this case, a program that was designed to make it more affordable to provide care to needy people today offers the biggest financial payoffs to hospitals that have lots of paying patients. (Teegardin, 6/16)

Stat: Cancer Patient Sues Celgene For Thwarting Generic Versions Of Pricey Meds

In what may be a first, a patient has filed a lawsuit accusing a drug maker of hiding behind a mandated safety program to thwart generic competition. The company, in this case, is Celgene. The lawsuit, which was filed by a cancer patient and consumer advocate named David Mitchell, accused the biotech of exploiting a Food and Drug Administration program that is designed to boost safety. Typically such a program, known as a Risk Evaluation and Mitigation Strategy, requires drug makers to develop a plan to educate physicians and monitor distribution. (Silverman, 6/15)

Columbus Dispatch: Which Side Should We Believe In Battle Over Ohio Drug Prices?

The Ohio Drug Price Relief Act comes in response to many of the consumer concerns. The initiated statute would require the state to pay no more than the lowest cost of drugs purchased by the U.S. Department of Veterans Affairs, a discount of at least 24 percent and potentially up to 40 percent when rebates are included. (Johnson, 6/18)

Stat: Are Drug Makers Overlooking The Next Big Category Of Sleep Drugs?

Drug makers have long flocked to sleep, trying to develop treatments to help people snooze longer and more soundly. But they've barely scratched the surface in exploiting the emerging connection between poor sleep and the inflammation that plays a key role in conditions like rheumatoid arthritis, lupus, and HIV/AIDS...Evidence is piling up from both animal and human studies that suggests the link between sleep and inflammation may go both ways, in something of a vicious circle. Sleep problems are hypothesized to be both the partial cause and consequence of inflammation, in a process that plays out by activating signaling pathways at the molecular and cellular levels. (Robbins, 6/16)

Bloomberg: FDA To Clear Path For Drugs Aimed At Cancer-Causing Genes

For years, doctors have identified cancers by the affected body part: lung, breast, kidney. Now, in a long-awaited move, U.S. drug regulators will simplify the approval of treatments targeting specific gene mutations that can spur tumors in a variety of organs. The Food and Drug Administration will soon announce a plan to update agency policies and facilitate the approval of critically needed drugs, including so-called "tumor-agnostic" therapies that target cancer-linked DNA, according to FDA Commissioner Scott Gottlieb. (Edney and Cortez, 6/20)

Stat: Will Trump's FDA Bend The Rules? Coming Portola Decision Could Be A Clue

Is the FDA under new Commissioner Scott Gottlieb willing to be flexible with the rules, and maybe even lower regulatory standards a wee bit, to approve new drugs? It's a question that will be partially answered in the coming days when the FDA hands down a decision on betrixaban, a new anticoagulant developed by Portola Pharmaceuticals. Portola is asking the FDA to approve betrixaban to reduce the risk of dangerous blood clots in patients who are leaving the hospital after treatment for a medical (as opposed to a surgical) illness. The betrixaban clinical data, however, are messy. The drug failed to significantly reduce blood clots, when compared with placebo, in its sole phase 3 clinical trial. (Feurstein, 6/21)

20. Perspectives: The Flaws And Fluff Of Trump's Drug Pricing Plan

Read recent commentaries about drug-cost issues.

Stat: Pharma May Be 'Getting Away With Murder,' But Trump May Issue A Pardon

It wasn't too long ago that President Trump said drug makers are "getting away with murder." But it sure sounds like he's about to grant them a presidential pardon. For months, Trump has kept these companies off balance with remarks that suggest he's willing to consider ideas they find abhorrent in an effort to rein in drug prices. Now, though, his team is reportedly considering moves that would do little to address the problem — and would instead please the pharmaceutical industry. (Ed Silverman, 6/19)

Bloomberg: How Trump Can Curb Runaway Drug Prices

On numerous occasions, President Donald Trump has vowed to take action to constrain drug prices. Although the specifics of Trump's plans to lower prices are reportedly being hammered out as I write, the wrong action could have disastrous effects. Many of us remember the gas shortages of the 1970s due to price controls. Government price controls will almost certainly inadvertently produce price increases in some markets and drug shortages in others. Equally as important, misguided interference could undercut the incentives necessary to support a vibrant life-sciences industry. America's free-market system and investments in basic research through the National Institutes of Health and universities have created the world's most dynamic innovation engine for medical research. (Arthur Laffer, 6/17)

CNBC: Trump Can Lower Prescription Drug Prices Now

President Donald Trump is about to begin his push to lower drug prices. According to several reports, he's likely to sign an executive order outlining a plan by early July. The good news is that the easiest and most beneficial way to cut prices comes from something Trump likes to do already: reduce regulations. Few industries are laden with more regulations and government-imposed delays than big pharma. Since we're talking about potentially lethal drugs here, there are obviously some good reasons for a number of those rules. But critics have long complained that some of them don't provide more safety while they add to the industry's costs and reduce competition. (Jake Novak, 6/19)

The Wall Street Journal: Take Me Out To The Pill Game

For perspective on the national angst over drug prices, let's pay a visit to the ballpark. The average Major League Baseball player earns an annual salary of more than \$4 million (plus \$100 a day in meal money)—far more than it takes to lead a comfortable, well-appointed life. Let's say the team owners cut those salaries by half, to \$2 million or so. Putting aside the union protections that the players enjoy, surely they would continue showing up to work. Almost certainly fans would continue to enjoy the same quality of play on the field. (Dana P. Goldman and Darius N. Lakdawalla, 6/19)

Morning Consult: Outcomes-Based Drug Contracts Do Not Move Us Closer To Value

Polls show that high drug prices are voters' No. 1 concern in health care. Unsurprising, given that the U.S. ranks highest both in drug spending and in patients stopping their medications because they are unaffordable. According to many pharmaceutical corporations and academic health care economists on Big Pharma's dole, outcomes-based contracting for drugs is the solution. Policymakers should not dive into this pool; we propose a toe in the water at most. Odds are that outcomes-based contracts will do little to ameliorate the crushing cost of drugs in the U.S., and may delay reforms that actually link a drug's price to its benefits. (Anna Kaltenboeck and Peter B. Bach, 6/21)

Stat: Pharma Companies Fight Behind-The-Scenes Wars Over Generic Drugs

All good things must come to an end" is a proverb that brand-name drug makers have trouble taking to heart. Just look at the strategies used to prevent competitors from bringing less-expensive generics to market. Pharmaceutical research has led to tremendous advances in medicine. Because of the extraordinarily high cost of bringing new drugs to the market, our intellectual property system is designed to ensure that drug companies recoup their investment and earn a profit. After a period of time, though, generic competitors are supposed to be able to enter the market and bring down prices through competition. (Robin Feldman, 6/16)

Bloomberg: John Paulson Won't Save Valeant

Valeant Pharmaceuticals Inc. investors have a tendency to grasp at any perceived scrap of good news, usually to their detriment. The latest ray of hope is Monday's news that John Paulson, manager of the Paulson & Co. hedge fund, Valeant's largest shareholder, is joining the company's board. Shares are up 5.7 percent Monday afternoon, but this shouldn't be cause for much celebration. (Max Nisen, 6/19)

Stat: Bedside Drug Production Will Truly Enable Personalized Medicine

Making medicines tailored to the needs and characteristics of individual patients is the dream for many scientists. This kind of personalized medicine approach would provide treatment with the highest possible effectiveness and safety, and would also save money. But it requires rethinking how we make medications. The starting point of personalized medicine can be traced to the completion of the Human Genome Project, which sequenced almost the entire human genome, in 2001. Since then, however, only a limited number of personalized pharmaceutical treatments have reached patients. (Huub Schellekens, 6/19)

Bloomberg: Get Generic Drugs To Market Faster

In late April, Patrick Leahy, a Democratic senator, and Tom Marino, a Republican member of the House of Representatives, introduced legislation to promote timely access to low-cost, high-quality generic drugs. Passing this bipartisan CREATES Act is one important way for Congress to push back against soaring prescription drug prices in the U.S. Since 2014, net retail prescription drug prices have risen 10 percent annually, primarily driven by ever higher launch prices and more frequent markups on brand-name drugs. From 2008 to 2016, the average net price for the most commonly used brand-name retail drugs rose more than 200 percent. The average list price of a new oral anti-cancer drug now exceeds \$130,000 per year. (Ameet Sarpatwari and Aaron S. Kesselheim, 6/20)

Modern Healthcare: The Drug Industry's Irresponsible Price Hikes

When an individual or organization is under public assault, it pays to heed the advice of the crisis consultants. Stop doing what got you in trouble, be contrite, and start acting in a socially responsible manner. No, this week's column isn't about President Donald Trump. (Merrill Goozner, 6/10)

21. Different Takes: Demanding Explanations About The Contents Of The GOP's 'Secret' Health Plan And The Process Used To Craft It

Editorial pages are filled with tough warnings for Republican lawmakers as they proceed with their efforts to repeal and replace the Affordable Care Act.

The New York Times: The Health Care Of Millions Depends On A Few Senators

We do not know a lot about what is in the health care bill that Republicans are trying to rush through the Senate, but what we do know suggests it will be as bad or worse than the dreadful legislation that the House passed in May. The Senate majority leader, Mitch McConnell, is doing everything he can to keep the public in the dark about his plan to undo major provisions of the Affordable Care Act, or Obamacare. But Washington being Washington, a few details have become public. All are alarming and depressing. And as they emerge, and the public unveiling of the bill grows closer — it could come on Thursday — the need for a few wise Republicans to stand with Senate Democrats to say "no" becomes ever more urgent. (6/21)

Bloomberg: The Republican Health-Care Trap

Are congressional Republicans about to walk into a trap of their own making? With a vote coming (perhaps) next week, the strategy they've followed all year is about to drop them unceremoniously on a path to being stuck with an unpopular law few of them appear to even want in the first place. (Jonathan Bernstein, 6/20)

The New York Times: G.O.P. Health Plan Is Really A Rollback Of Medicaid

Tucked inside the Republican bill to replace Obamacare is a plan to impose a radical diet on a 52-year-old program that insures nearly one in five Americans. The bill, of course, would modify changes to the health system brought by the Affordable Care Act. But it would also permanently restructure Medicaid, which covers tens of millions of poor or disabled Americans, including millions who are living in nursing homes with conditions like Alzheimer's or the aftereffects of a stroke. (Margot Sanger-Katz, 6/20)

Los Angeles Times: GOP's Secret Trumpcare Bill Will Impact A Sixth Of The U.S. Economy. What Could Possibly Go Wrong?

Seenate Majority Leader Mitch McConnell (R-Ky.) is pushing for a vote next week on a bill to repeal and replace Obamacare despite having held no public hearings, obtained no feedback from budget analysts and taken no testimony from doctors, patients or hospitals. That's a recipe for disaster. (6/21)

RealClear Health: Senate Dems: GOP Health Bill Secretive, In Contrast To Obamacare

The secretive way in which Republicans are drafting the current health care bill bears no resemblance to how Democrats put together Obamacare seven years ago, Senate Democrats argue. With only a few weeks remaining before the make-or-break August recess deadline, lawmakers from both sides of the aisle have bemoaned the back-room crafting of Senate Republicans' American Health Care Act, a draft of which could come as early as Thursday. (Ford Carson, 6/21)

USA Today: Women Aren't The Most Glaring Omission In GOP Health Bill Talks

There has been much attention to the gender composition of the working group creating the Senate plan to repeal and replace Obamacare. All 13 of them are men. That's even though women make up slightly more than 50% of the population, and they might have had a thing or two to say on such things as whether maternity care and gynecological services should be covered. Surely, the Republican leaders could have picked at least one of the five female Republican senators. But don't overlook an even more jarring omission: Democrats. (Dan Carney, 6/21)

The Washington Post: John Kasich And John Hickenlooper: Another One-Party Health-Care Plan Will Be Doomed To Failure

The fate of America's health-care system, the focus of our nation's most important — and most heavily politicized — public-policy debate, is in the hands of the Senate, where senators get their turn to find a balanced and sustainable approach to health-care reform. It is clear that the bill passed by the House in May will not meet the challenges of our health-care system. This bill calls into question coverage for the vulnerable, fails to provide the necessary resources to ensure that no one is left out and puts the health and well-being of millions of hard-working people in our states at risk, while shifting significant costs to the states. Medicaid provisions included in this bill are particularly problematic. (Govs. John Kasich and John Hickenlooper, 6/20)

Milwaukee Journal Sentinel: On Health Care, Republicans Have Some Explaining To Do

The problem with writing the bill in secret is that it allows Democrats to vilify it in public without knowing what's in it. In the past, voters were skeptical of government involvement in private-market health care, but Obamacare has changed that; Democrats can now argue Republicans are taking something away. (Christian Schneider, 6/20)

The Kansas City Star: What's In The Senate's Secret Health Care Bill?

This week, Republicans in the U.S. Senate have worked in darkness, crafting a bill designed to remake the nation's health care industry. There have been no hearings. No publicly available copies of the bill. No Democratic involvement. Not a single attempt to include the public in the legislative process. A vote is set for next week. (6/20)

USA Today: Face Facts, GOP: Obamacare Is A Lifeline That's Doing Enormous Good

My colleagues and I have been studying the effects of Medicaid and Obamacare, officially known as the Affordable Care Act, for several years. Two of our studies have been published in the past few weeks, just in time to offer some hard evidence that Congress should consider as it races toward votes that would make dramatic changes in health care. (Benjamin Sommers, 6/20)

Axios: Republicans See Medicaid As Welfare. Most Americans Don't

Republicans want to roll back the Medicaid expansion, cap federal Medicaid spending increases, and add work requirements, drug testing, time limits, copays and premiums to some state Medicaid programs. But almost no one else wants to do these things. One poll finding goes a long way toward explaining why: Republicans view Medicaid as a form of welfare, and pretty much everyone else views it as a government insurance program. (Drew Altman, 6/21)

CNN: Medicaid Works -- Let's Keep It That Way

Medicaid works. It provides life-sustaining health coverage to low-income Americans and life-enabling support to both children and adults with disabilities, giving them the tools they need to live independently within communities, to go to school and to seek work in their chosen fields. Few programs in history have done more good. Few dollars are spent with greater benefit. There are many ways in which we could strengthen the safety net that Medicaid provides, but right now, it basically works. If the current version of the Republican replacement for the Affordable Care Act secretly slouching its way through the Senate mirrors the House bill, it will cut Medicaid by well over \$800 billion. (David Perry, 6/20)

22. State Thoughts On Pending Health Plans: Protect Medicaid Expansion; What About Nevada's Obamacare Solution?

As lawmakers on Capitol Hill prepare for the unveiling of the Senate GOP's health bill, opinion writers across the country examine how key health policy ideas might work in their states.

Cincinnati Enquirer: Medicaid Expansion Must Be Protected

We need more help combatting addiction and increased access to affordable health care for all of us. As the Ohio Senate considers its budget and U.S. Senate considers the AHCA, Medicaid expansion must be protected. (O'dell M. Owens, 6/20)

Arizona Republic: Nevada Had - And Wasted - The Perfect Obamacare Solution

Last week, the Nevada state Legislature handed Gov. Brian Sandoval an innovative opportunity to replace the Affordable Care Act at the state level. Unfortunately, he didn't take advantage of the opportunity. ... Assembly Bill 374 would have directed the Nevada Department of Health and Human Services to ask for a CMS Waiver (called an 1115 waiver) to allow any Nevadan to buy a Medicaid managed care plan. Nevadans eligible for an Affordable Care Act tax credit (called an advance premium tax credit) or cost-sharing reductions based on income could have used them to help pay their share of the premium. ... "Medicare for All" is getting a lot of national attention again these days. Perhaps it's time to add "Medicaid for Many" to the discussion. (Daniel Derksen and Will Humble, 6/20)

Los Angeles Times: Single-Payer Healthcare For California Is, In Fact, Very Doable

The California Senate recently voted to pass a bill that would establish a single-payer healthcare system for the entire state. The proposal, called the Healthy California Act, will now be taken up by the state Assembly. The plan enjoys widespread support — a recent poll commissioned by the California Nurses Assn. found that 70% of all Californians are in favor of a single-payer plan — and with good reason. Under Healthy California, all residents would be entitled to decent healthcare without having to pay premiums, deductibles or copays. (Robert Pollin, 6/21)

Cincinnati Enquirer: GOP Health Plan Would Fail To Deliver On President's Promise

The emerging attempt by the Republican Senate majority to secure the 51 votes necessary to approve a new health care act, overturning Obamacare, on a timetable designed to avoid any committee hearings or debate, will do great harm to hundreds of thousands of Ohioans and millions of Americans. ... This fails utterly to fulfill the promise of lower costs without lowering coverage made by President Donald Trump during his campaign and which the people of our nation deserve. (John Pepper, 6/20)

Chicago Tribune: Another Obamacare Rate Shock

Buckle up, all you Illinoisans who depend on Obamacare health coverage. Wednesday is the deadline for rate request proposals from insurers. Customers can expect hefty premium hikes for next year's policies. Yes, again. It'll be this way until this faltering law gets fixed or replaced. For 2017, you may recall, Illinois rates leaped by more than 40 percent. For 2018, we'll see. (6/20)

Milwaukee Journal Sentinel: Wrong Direction On BadgerCare

Wisconsin lawmakers have proposed BadgerCare changes that would require the documentation of specific work hours and impose time limits on childless adults receiving health insurance when they are not working at least half-time. ... But requiring the demonstration of work hours is fundamentally misaligned with the realities of the low-wage labor market. (Laura Dresser and Elizabeth Lower-Basch, 6/20)

23. Viewpoints: A New Tool In The Fight Against The Opioid Epidemic; Standing Up For The Hungry

A selection of opinions on health care from around the country.

The Kansas City Star: New Lawsuit Is An Important Tool In Missouri's Fight Against Opioid Abuse

Missouri Attorney General Josh Hawley is taking an important and necessary step in the ongoing effort to address the opioid drug crisis in the state. Hawley sued three pharmaceutical companies in state court Wednesday in St. Louis, alleging the firms contributed to the overuse of pain-killing medicines such as OxyContin and Percocet. (6/21)

Cleveland Plain Dealer: Ohio Lawmakers: Stand Up For The Hungry

Helping poor Americans put food on their table ought to be nonnegotiable and nonpolitical. Alas, it isn't and if state and the federal budget cutbacks go into effect, poor children, seniors and adults can add hunger pangs to their list of woes. (6/20)

Boston Globe: Trump Doesn't Care About AIDS

Not since the lethal negligence of the Reagan administration have people with HIV and AIDS and their advocates faced with such presidential indifference. In a scorching resignation letter published by Newsweek, six now-former members of President Donald Trump's HIV/AIDS advisory council cited their inability to work for "a president who simply does not care." (Renée Graham, 6/20)

Los Angeles Times: Don't Let Rep. Scalise's Injury Cow Us Into Silence About The Need For Gun Control And Universal Healthcare

As a necessary prelude to a necessary discussion, surely we all can agree that best wishes are due to the still-hospitalized House Majority Whip Steve Scalise (R-La.), who faces a difficult recovery from injuries suffered in the gun attack at a Republican baseball practice June 14. ... But it's important not to overlook how Scalise's condition illuminates two of the most important public policy issues facing our country: There are too many guns in the hands of too many unsuitable owners; and healthcare is still treated in the United States as a privilege, not a right. (Michael Hiltzik, 6/20)

The New York Times: Stories About Disability Don't Have To Be Sad

For the most part, despite my wheelchair and knowledge of medical terminology (you build that kind of vocabulary when it's about your own limbs), my daily reality is mostly the same as that of my classmates. I groan over the same math and science homework, giggle with the same friends, and like every other adolescent, I probably spend too much time on my phone. As a girl with a disability, I know that my story is not a sad one. For the past four years, I've been trying to convince everyone else as well that my story doesn't have to be a sad one. (Melissa Shang, 6/21)

Stat: My Decade At The WHO: Dirty Fights And Steps Toward Universal Coverage

Contentious issues were legion. Proposals that aimed to increase access to affordable medicines were nearly always sidetracked by people-versus-profits issues, with barely veiled suspicions that trade rules were rigged to favor rich and powerful nations. Equally difficult issues arose when public health interests crossed purposes with the interests of powerful economic operators, like the tobacco, alcohol, food, and beverage industries. Economic power readily translates into political power. Those industries fought nearly every move we made, from recommendations to reduce daily sugar intake and tax sugary beverages to warnings that alcohol front groups must not write national alcohol policies to our advice on how to stop the marketing of unhealthy foods and beverages to children. (Margaret Chan, 6/20)

The New York Times: Charleena Lyles Needed Health Care. Instead, She Was Killed.

On Sunday morning, two Seattle police officers shot and killed Charleena Lyles in her apartment. She was pregnant, and three of her four children were home. She had called the police to report a burglary. According to the officers' account, shortly after they arrived, Ms. Lyles, who the police knew was mentally ill, pulled a knife. Both officers shot her. Societal failure to care for mental health, which leaves the police as mental illness first responders, may well have been one deadly ingredient in this tragic encounter. (Phillip Atiba Goff and Kim Shayo Buchanan, 6/20)

Kaiser Health News is an editorially independent operating program of the Kaiser Family Foundation. (c) 2017 Kaiser Health News. All rights reserved.

Follow us on Twitter | Facebook | LinkedIn

You are subscribed to this email alert as juliek@health.ok.gov.

Update your email preferences to choose the types of emails you receive. Or, permanently unsubscribe from all emails.

If you need help or have questions, please send an email to subscriptions@kaiserhealthnews.org Please do not reply to this email as this address is not monitored.

Kaiser Family Foundation & Kaiser Health News | 2400 Sand Hill Road | Menlo Park, CA 94025